	IN REPLY REFER TO
(Requester Name and Address)	Case No.: _____
_____	Community: _____
_____	Community No.: _____
_____	216-REFUND(2)
_____	

Re: **(Property Description)** _____

Dear _____:

This responds to your **(Date of Requester's Letter)**, request that the Federal Emergency Management Agency (FEMA) issue a determination regarding your property in the above-referenced community.

[CONTINUE THE FIRST PARAGRAPH WITH THE FOLLOWING FOR REFUND FOR LOMA REQUEST; PAYMENT SUBMITTED AS CASHIER'S CHECK OR MONEY ORDER]

With your request, you submitted a cashier's check or money order in the amount of **$(Fee Submitted)** to defray the cost of FEMA's review. Because your request is for a Letter of Map Amendment, no review and processing fees are required. Therefore, a check in the amount of **$(Refund)** will be forwarded to you under separate cover within 60 days. Please notify us if you do not receive the check in the specified timeframe.

[CONTINUE THE FIRST PARAGRAPH WITH THE FOLLOWING FOR REFUND FOR LOMA REQUEST; PAYMENT SUBMITTED AS CHECK]

With your request, you submitted a check in the amount of **$(Fee Submitted)** to defray the cost of FEMA's review. Because your request is for a Letter of Map Amendment, no review and processing fees are required. Therefore, as required by provisions of the Debt Collection Improvement Act of 1996 (Pub. L. 104-134), as implemented by the U.S. Treasury via 31 CFR Part 208, we will refund **$(Refund)** electronically, using the bank information referenced on your check. Please notify us if this refund has not been posted to your account within 30 days of the date of this letter.

[CONTINUE THE FIRST PARAGRAPH WITH THE FOLLOWING FOR REFUND FOR LOMA REQUEST; PAYMENT MADE BY CREDIT CARD]

With your request, you submitted a credit card payment in the amount of $**(Fee Submitted)** to defray the cost of FEMA's review. Because your request is for a Letter of Map Amendment, no review and processing fees are required. Therefore, a refund of $**(Refund)** has been credited to your account electronically by the FEMA Fee-Charge System Administrator as of the date of this letter.

(MCC Address, Telephone Number, and Fax Number)

(MCC Company Name), under contract with the **FEDERAL EMERGENCY MANAGEMENT AGENCY, is a**
Map Coordination Contractor for the National Flood Insurance Program

C-31

[CONTINUE THE FIRST PARAGRAPH WITH THE FOLLOWING FOR OVERPAYMENT OF CLOMA PROCESSING FEE; PAYMENT MADE BY CREDIT CARD]

With your request, you submitted a credit card payment in the amount of **$(Fee Submitted)** to defray the cost of FEMA's review. The review and processing fee for your request is [$400/ $700]. Therefore, a refund in the amount of **$(Refund)** has been credited to your account electronically by the FEMA Fee-Charge System Administrator as of the date of this letter.

We are reviewing the remainder of your request package. When our review is complete, we will inform you of any additional information that may be required to complete the processing. [After we have reviewed all information, FEMA may amend the National Flood Insurance Program map, if appropriate].

If you have any questions regarding this letter, please call the FEMA Map Assistance Center, toll free, at 1-877-FEMA MAP (1-877-336-2627).

Sincerely,

MCC Contact's Digitized Signature

(MCC Contact's Name)
(MCC Contact's Title)

bcc: MT-TS-HS Chron   MT-TS-HS
      FCSA
      MCC Case File